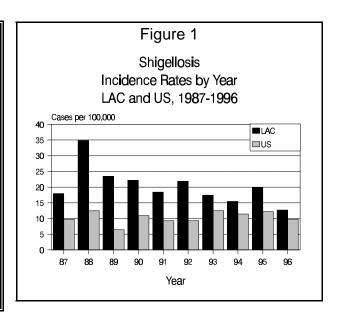


SHIGELLOSIS

CRUDE DATA	
Number of Cases	1,128
Annual Incidence ^a	
LA County	12.7
California	12.4
United States	9.8
Age at Onset	
Mean	18.8
Median	8
Range	< 1-89 yrs
Case Fatality	
LA County	0.0%
United States	N/A



ETIOLOGY

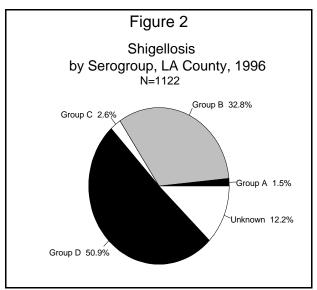
Shigella is a gram-negative bacillus with four serogroups: A (dysenteriae), B (flexneri), C (boydii), and D (sonnei).

DISEASE ABSTRACT

In 1996, there was a decrease in the incidence and the number of cases of shigellosis to a five year low (Figure 1). The number of outbreaks also declined. Serogroups B and D were most prevalent (Figure 2).

STRATIFIED DATA

Trends: Shigellosis incidence continued to be highest among the young, with more than one-half of all cases occurring in those under fifteen and at least one-



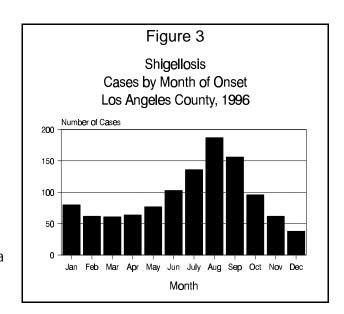
^aCases per 100,000 population.



third under the age of five. In 1996, total cases decreased by 34% from the previous year.

Seasonality: The typical increase in shigellosis during the summer and early fall, with peak incidence in August, continued in 1996 (Figure 3).

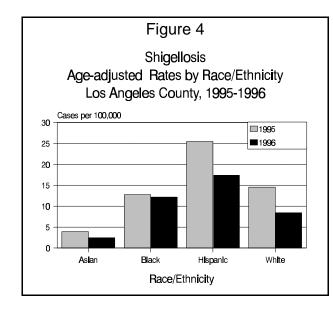
Age: Eighty percent of cases occurred among persons under 35, and 57% were in children under 15. The highest rate, 56.5 per 100,000 population, was seen among 1- to 4-year-olds, and represents a decrease of 37% from 1995. Except for a slight increase among 55-to 64-year-olds, rates declined in all age groups (Figure 4).

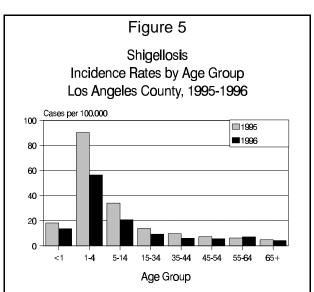


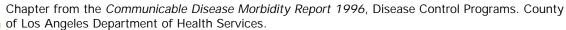
Sex: The male-to-female ratio was 1:1.1.

Race/Ethnicity: In 1996, the incidence of shigellosis continued to be highest among Hispanics (17.4 per 100,000 population). Rates decreased in all ethnic groups, 42% in Whites, 38% in Asians, 32% in Hispanics, and 4% in Blacks (Figure 5).

Location: The highest rates of shigellosis in 1996 were in the Hollywood-Wilshire (25.7 per 100,000 population), South (21.5 per 100,000), and Central (20.6 per 100,000) Health Districts.









COMMENTS

There were five shigellosis outbreaks reported in 1996 compared with nine in 1995. One outbreak occurred in a workshop employing developmentally disabled adults; another took place in a restaurant and the remaining three occurred in child day-care situations. The incidence of day-care outbreaks in 1996 (n=3) was the same as in the previous year. There were no outbreaks reported in congregate living situations, compared to four in 1995. Other than the periodic fluctuation in annual rates, no explanation for the declining incidence in 1996 was identified.